



**STATE OF MONTANA  
DEPARTMENT OF CORRECTIONS  
YOUTH COMMUNITY CORRECTIONS**

**NOTICE OF HEARING**

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**IN THE MATTER OF:** \_\_\_\_\_

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Notice is hereby given to: \_\_\_\_\_ Youth ID: \_\_\_\_\_

to appear before the Regional Hearings Officer at \_\_\_\_\_  
(Location/Address)

on \_\_\_\_\_ at \_\_\_\_\_ for the hearing on alleged violations of  
(Date) (Time)  
your Juvenile Parole Agreement.

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\_\_\_\_\_  
*Juvenile Parole Officer's Signature* \_\_\_\_\_ *Date*

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**CERTIFICATE OF SERVICE**

I hereby certify that I served \_\_\_\_\_  
this *Notice of Hearing* on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

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\_\_\_\_\_  
(Signature) \_\_\_\_\_ (Name & Title)

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Copy: Youth, Youth's Attorney, Parents/Guardians/Custodians or their Representatives, Hearings Officer, Youth Correctional Facility